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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 Effective December 8, 2004										Application or Dockel Number		
APPLICATION AS FILED - PART I (Column 1) (Column 2)							SMALI	LENTITY	OR). OTHER THAN SMALL ENTITY		
Ŀ	FOR	· NU	MBER FILE	טא ס	NUMBER EXTRA		RATE (\$)	FEE (S)	1	RATE (\$)	FEE (5)	
	SIC FEE CFR 1.16(a), (b), c	r (c))	ŅVA		. N/A	7	NA	150.00	1	NA	300.00	
SEARCH FEE (37 CFR 1 16(N), (1), or (m))			· N/A	*	N/A.		- N/A	\$250	1	N/A	\$500	
EXAMINATION FEE (37 CFR 1.16(d), (p), or (q))			N/A .	1	N/A]	N/A	\$100	7	N/A	\$200	
TOTAL CLAIMS (37 CFR 1.18(1))			minus	20 =			X\$ 25 .	1	OR	X\$50 .	<u> </u>	
	DEPENDENT CL CFR 1.16(h))	AIMS	minus 3 = .*			7	X100 .		1	X200 .	 	
FE	PLICATION SIZI E CFR 1.16(6))	sheets Is \$250 addition	of paper, (\$125 for nal 50 she	s exceed 100 I size fee due or each thereof. See FR 1.16(s).					·			
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(i))] [+180=]	+360=		
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL]	TOTAL		
APPLICATION AS AMENDED - PART II												
(Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	OR OTHER THAN SMALL ENTITY		
AMENDMENT A	6/15/18	CLAIMS REMAINING AFTER AMENOMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADOI- TIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	17	Minus	24	0	1 1-	X\$ 25 .	, .	OR OR	X\$50 _		
	Independent G7 CFR 1,16(h)	3	Minus.	" 4	-/0		X100 _			X200		
AM	Application Size Fee (37 CFR 1.16(s))											
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16@)						+180=		OR	+360=		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
	· .	(Column 1)		(Column 2)	(Column 3)							
AMENDMENT B	:	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (5)	ADDI- TIONAL FEE (\$)	OR	RATE (\$)	ADDI- TIONAL FEE (\$)	
	Total (37 CFR 1.16(i))		Minus	••	=		X\$ 25 .			X\$50 ·		
	Independent (27 CFR 1.18(h))		Minus	• • •	B		X100 "		OR	X200		
₹	Application Size Fee (37 CFR 1.16(s))											
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(0))						+180=		OR	+360=		
							TOTAL, NOD'L FEE			TOTAL ADD'L FEE		
 If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". If the "Highest Number Previously Paid For" (IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1. 												

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to completed, including gathering, preparing, and submitting the completed application form to the USPTO. Time will very depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.

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